

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

ADDRESS (number and street)

7000 CARDINAL PLACE

☐Check if different
than previously
reported. (ACC)

DUBLIN

OH

43017

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00332833

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☒Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

11

01

2007

through

11

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JAMES W. HOEBERLING

Signature of Treasurer

Electronically Filed by JAMES W. HOEBERLING

Date

12

04

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	1	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		179267.79
(b) Cash on Hand at Beginning of Reporting Period	214749.51	
(c) Total Receipts (from Line 19)	16525.02	169571.74
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	231274.53	348839.53
7. Total Disbursements (from Line 31)	19000.00	136565.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	212274.53	212274.53
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Report Covering the Period:

From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	15224.88	120691.96
(i) Itemized (use Schedule A)		
(ii) Unitemized	504.49	41417.32
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	15729.37	162109.28
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	15729.37	162109.28
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	795.65	7462.46
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	16525.02	169571.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16525.02	169571.74

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	3065.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	3065.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	65000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	12000.00	68500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	19000.00	136565.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	19000.00	136565.00

DETAILED SUMMARY PAGE

of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	15729.37	162109.28
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15729.37	162109.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	3065.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	3065.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Steven Adams Mailing Address 2811 Autumn Lake Dr City State Zip Code Katy TX 77450 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Pres, Pharmacy Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.05		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84565 Amount of Each Receipt this Period 57.70 Receipt Payroll Deduction: (28.85- /Pay Period)
B. Full Name (Last, First, Middle Initial) Michael Ambrose Mailing Address 4303 Aldon Court City State Zip Code Palm Harbor FL 34685 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vice President Of Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84427 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) David Anderson Mailing Address 15917 Willis Way City State Zip Code Woodbine MD 21797 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp/gm, Hsp Mkt & Innov St Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 969.97		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84637 Amount of Each Receipt this Period 115.38 Receipt Payroll Deduction: (57.69- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		193.08
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Charles Armstrong		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7
Mailing Address 6864 Rob Roy Drive		Transaction ID: 71204.C84550
City Dublin	State OH	Zip Code 43017-8084
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.70
Name of Employer Cardinal Health, Inc	Occupation Dir, Finance Systems	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 535.67	Payroll Deduction: (22.85- /Pay Period)

B. Full Name (Last, First, Middle Initial) Cassandra Baker		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7
Mailing Address 1672 Barrington Rd		Transaction ID: 71204.C84635
City Upper Arlington	State OH	Zip Code 43221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 106.54
Name of Employer Cardinal Health, Inc	Occupation Vp, Gov't Relations	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1008.23	Payroll Deduction: (53.27- /Pay Period)

C. Full Name (Last, First, Middle Initial) James Balzer		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7
Mailing Address 3510 Deep Cove Dr		Transaction ID: 71204.C84451
City Cumming	State GA	Zip Code 30041
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.32
Name of Employer Cardinal Health, Inc	Occupation Mgr li, Logistics	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.95	Payroll Deduction: (10.66- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

173.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) James Barker Mailing Address 2761 Skelton Ln City Blacklick State OH Zip Code 43004 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Purchasing - Gbl Supp Sol Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 556.88		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84560 Amount of Each Receipt this Period 52.00 Receipt Payroll Deduction: (26.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Gregory Baumli Mailing Address 14566 Somerset Cir City Green Oaks State IL Zip Code 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Manufacturing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 617.53		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84561 Amount of Each Receipt this Period 52.68 Receipt Payroll Deduction: (26.34- /Pay Period)
C. Full Name (Last, First, Middle Initial) Johnni Beckel Mailing Address 3680 Nicoya Court City Lewis Center State OH Zip Code 43035 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84456 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		304.68
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Laurel Beeler Mailing Address 1723 Eagle Trl City State Zip Code Oxford MI 48371 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Reg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84555 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Michael Bender Mailing Address 3980 Baughman Grant Rd City State Zip Code New Albany OH 43054 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Pres/gm, Retail/alternate Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84539 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Porter Bertelson Mailing Address 6895 Macneil Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Hospital Pharma Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 874.92		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84582 Amount of Each Receipt this Period 74.62 Receipt Payroll Deduction: (37.31- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

164.62

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Shelley Bird Mailing Address 7998 Caraway Ave City State Zip Code Dublin OH 43016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp,communications Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1400.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84454 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)
B. Full Name (Last, First, Middle Initial) Timothy Boes Mailing Address 103 La Trobe Ct City State Zip Code Southlake TX 76092 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Medication Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2090.77		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84649 Amount of Each Receipt this Period 179.44 Receipt Payroll Deduction: (89.72- /Pay Period)
C. Full Name (Last, First, Middle Initial) James Bonanni Mailing Address 7511 Plum Hollow Cir City State Zip Code Liverpool NY 13090 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84418 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		399.44
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Timothy Booth Mailing Address 7368 Tottenham Place City State Zip Code New Albany OH 43054 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Vend Mgmt And Metrics Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84419 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Scott Bostick Mailing Address 1546 Vivaldi Drive City State Zip Code Cardiff CA 92007 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp & Gm Supply Technologie Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 960.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84596 Amount of Each Receipt this Period 80.00 Receipt Payroll Deduction: (40.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Mark Branday Mailing Address 55 Island Blvd City State Zip Code Fox Island WA 98333 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 769.95		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84577 Amount of Each Receipt this Period 65.92 Receipt Payroll Deduction: (32.96- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		165.92
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Michael Brown			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 3103 Saddle Ridge			Transaction ID: 71204.C84482	
City State Zip Code Richmond TX 77469			Amount of Each Receipt this Period 28.46	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Svp, Pharm Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 341.52		
B. Full Name (Last, First, Middle Initial) Thomas Burke			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 21 Parsons Drive			Transaction ID: 71204.C84547	
City State Zip Code Swampscott MA 01907			Amount of Each Receipt this Period 43.84	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Svp, Supply Solutions		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 514.11		
C. Full Name (Last, First, Middle Initial) Charles Burwell			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 4125 Via Cangrejo			Transaction ID: 71204.C84630	
City State Zip Code San Diego CA 92130			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Svp, Strategic Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional)

172.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Stacy Butterfield Mailing Address 5151 Woodbridge Dr City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation SVP, Global Financial Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84626 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Gary Cacciatore Mailing Address 3810 Loch Glen Court City State Zip Code Houston TX 77059 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Regulatory Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 744.02		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84579 Amount of Each Receipt this Period 66.00 Receipt Payroll Deduction: (33.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Thomas Calhoun Mailing Address 5n496 W Lakeview Cir City State Zip Code St Charles IL 60175 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Warehouse Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 678.17		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84566 Amount of Each Receipt this Period 57.86 Receipt Payroll Deduction: (28.93- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		223.86
TOTAL This Period (last page this line number only) ▶		

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Steven Callison Mailing Address 1368 Lincoln Road City Columbus State OH Zip Code 43212 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 358.35		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 71204.C84495 Amount of Each Receipt this Period <table border="1"> <tr> <td>31.92</td> </tr> </table> Receipt Payroll Deduction: (15.96- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	9	/	2	0	0	7	31.92
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	9	/	2	0	0	7														
31.92																							
B. Full Name (Last, First, Middle Initial) Anthony Caprio Mailing Address 6 Cottage Lane City Marlboro State NJ Zip Code 07746 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Ips Sales Ne Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1400.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 71204.C84455 Amount of Each Receipt this Period <table border="1"> <tr> <td>200.00</td> </tr> </table> Receipt Payroll Deduction: (100.0- 0/Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	9	/	2	0	0	7	200.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	9	/	2	0	0	7														
200.00																							
C. Full Name (Last, First, Middle Initial) Debra Caravelli Mailing Address 4862 Vista Ridge Dr City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Hr Service Deliv/vend Mgm Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 507.15		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 71204.C84546 Amount of Each Receipt this Period <table border="1"> <tr> <td>43.26</td> </tr> </table> Receipt Payroll Deduction: (21.63- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	9	/	2	0	0	7	43.26
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	9	/	2	0	0	7														
43.26																							

SUBTOTAL of Receipts This Page (optional)

275.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Kerry Clark Mailing Address 8515 Fox Cub Lane City State Zip Code Cincinnati OH 45243 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Chairman & Co Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 2692.20			Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84513 Amount of Each Receipt this Period 384.60 Receipt Payroll Deduction: (192.3- 0/Pay Period)
B. Full Name (Last, First, Middle Initial) Mary Ann Clyburn Mailing Address 24262 Cataluna Cir City State Zip Code Mission Viejo CA 92691 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Program-ips Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 255.77			Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84453 Amount of Each Receipt this Period 21.90 Receipt Payroll Deduction: (10.95- /Pay Period)
C. Full Name (Last, First, Middle Initial) Jack Coffey Mailing Address 8191 Winchcombe Dr City State Zip Code Dublin OH 43016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Quality Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 1100.00			Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84461 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)

SUBTOTAL of Receipts This Page (optional)

606.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mary Cooney Mailing Address 2211 Briarglen #507 City State Zip Code Houston TX 77027 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1732.90		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84467 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)
B. Full Name (Last, First, Middle Initial) Bonita Court Mailing Address 5392 S Cambridge Ln City State Zip Code Greenfield WI 53221 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Sr Mgr, Sls & Mktg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 540.37		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84551 Amount of Each Receipt this Period 46.44 Receipt Payroll Deduction: (23.22- /Pay Period)
C. Full Name (Last, First, Middle Initial) Leland Cox Mailing Address 43 N Ohio Ave City State Zip Code Columbus OH 43203 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, National Chain Accounts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84465 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)

SUBTOTAL of Receipts This Page (optional)

446.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) John Cullivan Mailing Address 1 Miranova Place #910 City Columbus State OH Zip Code 43215 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Strategic Planning Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2153.90		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84496 Amount of Each Receipt this Period 307.70 Receipt Payroll Deduction: (153.8- 5/Pay Period)
B. Full Name (Last, First, Middle Initial) Jody Davids Mailing Address 7638 Red Bay Court City Dublin State OH Zip Code 43016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Global Shared Svc & C Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84634 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Ronald Dedels Mailing Address 8371 Dolman Drive City Powell State OH Zip Code 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Sales Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 388.53		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84500 Amount of Each Receipt this Period 33.28 Receipt Payroll Deduction: (16.64- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

440.98

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) James Derleth Mailing Address 1510 Woodvale Ave City State Zip Code Deerfield IL 60015 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Ips Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84628 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) John Dexheimer Mailing Address 1521 Towne Dr City State Zip Code Ellisville MO 63011 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Training & Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84431 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Ted Dibiase Mailing Address 4954 Rosegate Ct Island Drive City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Advice & Counsel Ctr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1468.80		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84644 Amount of Each Receipt this Period 122.40 Receipt Payroll Deduction: (61.20- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		242.40
TOTAL This Period (last page this line number only) ▶		

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Kurt Dieck Mailing Address 7037 Lake Trail Dr City State Zip Code Westerville OH 43082 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Strategy & Bus Dev - Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 71204.C84460 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table> Receipt Payroll Deduction: (100.0-0/Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	9		2	0	0	7	200.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	1		0	9		2	0	0	7																							
200.00																																
B. Full Name (Last, First, Middle Initial) Nancy Dixon Mailing Address 7002 Brodie Blvd City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Black Belt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 256.32		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 71204.C84452 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">21.36</td> </tr> </table> Receipt Payroll Deduction: (10.68-/Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	9		2	0	0	7	21.36									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	1		0	9		2	0	0	7																							
21.36																																
C. Full Name (Last, First, Middle Initial) Gary Dolch Mailing Address 8382 Deep Run City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Quality Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3084.50		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 71204.C84508 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">384.60</td> </tr> </table> Receipt Payroll Deduction: (192.3-0/Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	9		2	0	0	7	384.60									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	1		0	9		2	0	0	7																							
384.60																																

SUBTOTAL of Receipts This Page (optional)

605.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 74

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Michele Donatich Mailing Address 520 Penny Lane City Grayslake State IL Zip Code 60030 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Qlty Sys Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 287.70			Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84475 Amount of Each Receipt this Period 24.64 Receipt Payroll Deduction: (12.32- /Pay Period)
B. Full Name (Last, First, Middle Initial) Michael Duffy Mailing Address 6825 Macneil Drive City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84538 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Joseph Dunsmore Mailing Address 8206 Shannon Glen City Dublin State OH Zip Code 43016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Business Partners Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84437 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			84.64
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Charles Echols Mailing Address 5369 Lake Shore Ave City State Zip Code Westerville OH 43082 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Enviro Health & Safety Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 365.37		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84494 Amount of Each Receipt this Period 31.16 Receipt Payroll Deduction: (15.58- /Pay Period)
B. Full Name (Last, First, Middle Initial) Joel Efken Mailing Address 109 Avalon Valley Ln City State Zip Code Fenton MO 63026 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Finance Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 288.00		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84473 Amount of Each Receipt this Period 24.00 Receipt Payroll Deduction: (12.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) James Egan Mailing Address 4650 Aberdeen Ave City State Zip Code Dublin OH 43016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 614.55		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84562 Amount of Each Receipt this Period 27.43 Receipt Payroll Deduction: (27.43- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		82.59
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) James Egan Mailing Address 4650 Aberdeen Ave City State Zip Code Dublin OH 43016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 622.78		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 7 Transaction ID: 71204.C84888 Amount of Each Receipt this Period 8.23 Receipt Payroll Deduction: (8.23/- Pay Period)
B. Full Name (Last, First, Middle Initial) Gary Ellis Mailing Address 6146 Balmoral Drive City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Branded Purchasing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84463 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)
C. Full Name (Last, First, Middle Initial) Sue Ellen Erickson Mailing Address 21 Springfield 1a City State Zip Code Cranford NJ 07016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr li, Service Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 389.44		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84499 Amount of Each Receipt this Period 32.96 Receipt Payroll Deduction: (16.48- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		241.19
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Albert Estrada Mailing Address 1706 Pecan Crossing City State Zip Code Richmond TX 77469 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.36		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84470 Amount of Each Receipt this Period 22.80 Receipt Payroll Deduction: (11.40- /Pay Period)
B. Full Name (Last, First, Middle Initial) Leeann Evensen Mailing Address 1423 Shady Valley City State Zip Code Sugar Land TX 77479 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Application & Support Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84490 Amount of Each Receipt this Period 30.00 Receipt Payroll Deduction: (15.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Stephen Falk Mailing Address 2480 Sandover Rd City State Zip Code Columbus OH 43220 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp & General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84458 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)
SUBTOTAL of Receipts This Page (optional)		252.80
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Nathaniel Filler		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7
Mailing Address 7639 Presidium Loop		Transaction ID: 71204.C84486
City State Zip Code Galena OH 43021	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Mgr, Gov't Relations - St	Payroll Deduction: (15.00- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

B. Full Name (Last, First, Middle Initial) Stephen Flannery		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7
Mailing Address 275 East Center St		Transaction ID: 71204.C84503
City State Zip Code Shavertown PA 18708	Amount of Each Receipt this Period 36.72	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Svp, Medication Solutions	Payroll Deduction: (18.36- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.50	

C. Full Name (Last, First, Middle Initial) Ivan Fong		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7
Mailing Address 21 S. Parkview Ave.		Transaction ID: 71204.C84509
City State Zip Code Columbus OH 43209	Amount of Each Receipt this Period 384.60	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Chief Legal Officer & Sec	Payroll Deduction: (192.3- 0/Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.50	

SUBTOTAL of Receipts This Page (optional)

451.32

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Elizabeth Ford Mailing Address 2262 Yorkshire Road City State Zip Code Upper Arlington OH 43221 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Legal Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84627 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) David Fries Mailing Address 4491 Hickory Rock Dr City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Order To Cash Program Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84487 Amount of Each Receipt this Period 30.00 Receipt Payroll Deduction: (15.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Edmund Fry Mailing Address 1 Miranova Pl. Apt. 2040 City State Zip Code Columbus OH 43215 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Quality Assurance/reg Com Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84466 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		330.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Joshua Gaines Mailing Address 5721 Clover Lane Drive City State Zip Code Westerville OH 43081 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Counsel, Asst General Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84554 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Robert Giacalone Mailing Address 7471 Balfoure Circle City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Reg Affairs/chf Reg Cnsl Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1018.08		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84600 Amount of Each Receipt this Period 91.82 Receipt Payroll Deduction: (45.91- /Pay Period)
C. Full Name (Last, First, Middle Initial) Mary Gibson Mailing Address 433 Caren Drive City State Zip Code Buffalo Grove IL 60089 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Director, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84432 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		161.82
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) James Gill Mailing Address 1529 Woodvale Avenue City State Zip Code Deerfield IL 60015 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Strat Initiatives Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84492 Amount of Each Receipt this Period 30.00 Receipt Payroll Deduction: (15.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Robert Glover Mailing Address 5633 N Kostner Ave City State Zip Code Chicago IL 60646 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 688.04		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84568 Amount of Each Receipt this Period 58.92 Receipt Payroll Deduction: (29.46- /Pay Period)
C. Full Name (Last, First, Middle Initial) David Goldsberry Mailing Address 321 St Andrews Ln City State Zip Code Gurnee IL 60031 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Govt Sales & Operatio Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 461.50		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84506 Amount of Each Receipt this Period 39.82 Receipt Payroll Deduction: (19.91- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		128.74
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) David Gonzales			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 384 Colorado Drive			Transaction ID: 71204.C84632	
City State Zip Code Cedar Creek TX 78612			Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Dir, State Govt Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 850.00		
B. Full Name (Last, First, Middle Initial) Theresa Gould			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 3418 Big Hickory Dr.			Transaction ID: 71204.C84504	
City State Zip Code Kingwood TX 77345			Amount of Each Receipt this Period 37.16	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Vp, Hr Business Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 432.05		
C. Full Name (Last, First, Middle Initial) Scott Gregg			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 10682 Scarborough Way			Transaction ID: 71204.C84557	
City State Zip Code Powell OH 43065-8769			Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Svp, Taxes		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00		
SUBTOTAL of Receipts This Page (optional)			187.16	
TOTAL This Period (last page this line number only)				

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Michael Groesbeck

Mailing Address 33916 Summerfield

City State Zip Code
 Gurnee IL 60031

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Svp, Qra

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.23

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84505

Amount of Each Receipt this Period

39.14

Receipt

Payroll Deduction: (19.57-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. L Glenn Hall

Mailing Address 6678 Willow Grove Ln
Circle #1502

City State Zip Code
 Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, Gm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

731.27

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84576

Amount of Each Receipt this Period

62.38

Receipt

Payroll Deduction: (31.19-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Gregory Halvacs

Mailing Address 4964 Olentangy River
River Rd

City State Zip Code
 Delaware OH 43015

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Chief Security Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84624

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

201.52

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Charles Ham		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7
Mailing Address 3127 Lafayette		Transaction ID: 71204.C84448
City Houston	State TX	Zip Code 77005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Cardinal Health, Inc	Occupation Vp, Clinical Affairs	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	Payroll Deduction: (10.00- /Pay Period)

B. Full Name (Last, First, Middle Initial) Troy Hanson		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7
Mailing Address 5622 Dorsey Drive		Transaction ID: 71204.C84552
City Columbus	State OH	Zip Code 43235
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 48.08
Name of Employer Cardinal Health, Inc	Occupation Dir, Product Mgmt	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 556.25	Payroll Deduction: (24.04- /Pay Period)

C. Full Name (Last, First, Middle Initial) Mark Hartman		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7
Mailing Address 7677 Tartan Fields Dr		Transaction ID: 71204.C84459
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Cardinal Health, Inc	Occupation Svp, Global Mftr Serv & Lo	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2312.77	Payroll Deduction: (100.0- 0/Pay Period)

SUBTOTAL of Receipts This Page (optional)

268.08

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Linda Harty Mailing Address 1761 Roxbury Rd City Columbus State OH Zip Code 43212 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Cfo, Scs Healthcare Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2603.90		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84471 Amount of Each Receipt this Period 223.80 Receipt Payroll Deduction: (111.9-0/Pay Period)
B. Full Name (Last, First, Middle Initial) Richard Heard Mailing Address 8106 Bulrush Canyon Trail City Katy State TX Zip Code 77494 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Ips Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84558 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00-/Pay Period)
C. Full Name (Last, First, Middle Initial) Jeffrey Henderson Mailing Address 347 Morgan Ln City Gahanna State OH Zip Code 43230 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Chief Financial Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84535 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00-/Pay Period)

SUBTOTAL of Receipts This Page (optional)

313.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mark Henderson Mailing Address 6308 Mccoy City State Zip Code Shawnee KS 66226 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Reg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 224.58			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84652 Amount of Each Receipt this Period 19.38 Receipt Payroll Deduction: (9.69/- Pay Period)
B. Full Name (Last, First, Middle Initial) James Hethcox Mailing Address 5442 Haverhill Drive City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Is Medication Executive, Ips Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 787.86			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84580 Amount of Each Receipt this Period 66.70 Receipt Payroll Deduction: (33.35- /Pay Period)
C. Full Name (Last, First, Middle Initial) Jay Hexamer Mailing Address 770 Westwind Ln City State Zip Code Alpharetta GA 30005 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Sales Scientific Products Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 337.58			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84483 Amount of Each Receipt this Period 43.26 Receipt Payroll Deduction: (14.42- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			129.34
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Jay Hexamer Mailing Address 770 Westwind Ln City Alpharetta State GA Zip Code 30005 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Sales Scientific Products Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 323.16		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 7 Transaction ID: 71204.C84653 Amount of Each Receipt this Period -14.42 Receipt Payroll Deduction: (-14.4- 2/Pay Period)
B. Full Name (Last, First, Middle Initial) Gregg Hiller Mailing Address 5614 Kipling Parkway Apt. 307 City Arvada State CO Zip Code 80002 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84442 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) James Hinrichs Mailing Address 7037 Bordeaux Ct City Dublin State OH Zip Code 43016 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Controller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84536 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		45.58
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) James Homan Mailing Address 520 Eden Park Drive Apt # 17103 City Franklin State TN Zip Code 37067 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 314.74		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84479 Amount of Each Receipt this Period 26.64 Receipt Payroll Deduction: (13.32- /Pay Period)
B. Full Name (Last, First, Middle Initial) Justin Hooper Mailing Address 7670 Early Meadow Rd City Westerville State OH Zip Code 43082 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Director, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84424 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) John Howard Mailing Address 305 Vine Ct City Mandeville State LA Zip Code 70448 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Cnslt, Franchise Business Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84488 Amount of Each Receipt this Period 30.00 Receipt Payroll Deduction: (15.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		76.64
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Lori Huber Mailing Address 10091 Juliana Circle City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Director, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84426 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Wendy Hufford Mailing Address 5303 Rosalind Blvd. City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp & Associate General Cou Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84595 Amount of Each Receipt this Period 80.00 Receipt Payroll Deduction: (40.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Anthony Hunt Mailing Address 10208 Hollybrook Dr City State Zip Code Charlotte NC 28277 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 336.94		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84484 Amount of Each Receipt this Period 29.00 Receipt Payroll Deduction: (14.50- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		129.00
TOTAL This Period (last page this line number only) ▶		

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Stephen Inacker Mailing Address 1490 S Ridge Rd City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Pres/gm, Presource Products Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 722.14		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84575 Amount of Each Receipt this Period 62.30 Receipt Payroll Deduction: (31.15- /Pay Period)
B. Full Name (Last, First, Middle Initial) Brian Jackson Mailing Address 9055 Tartan Flds Dr City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Specialty Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 384.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84497 Amount of Each Receipt this Period 32.00 Receipt Payroll Deduction: (16.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Stephen Johnson Mailing Address 221 W Lancaster Ave # 2012 City Fort Worth State TX Zip Code 76102 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, South Region Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 719.89		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84574 Amount of Each Receipt this Period 61.40 Receipt Payroll Deduction: (30.70- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		155.70
TOTAL This Period (last page this line number only) ▶		

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Cheryl Kahn			Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 3049 Maple Leaf			Transaction ID: 71204.C84430	
City State Zip Code Glenview IL 60026			Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Counsel, Sr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		
B. Full Name (Last, First, Middle Initial) Remi Kajogbola			Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 15751 Sheridan St #149			Transaction ID: 71204.C84638	
City State Zip Code Fort Lauderdale FL 33331			Amount of Each Receipt this Period 117.42	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Svp, Integrated Solutions		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1371.42		
C. Full Name (Last, First, Middle Initial) Michael Kaufmann			Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 7160 Temperance Point St			Transaction ID: 71204.C84510	
City State Zip Code Westerville OH 43082			Amount of Each Receipt this Period 384.60	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Group President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2609.90		

SUBTOTAL of Receipts This Page (optional)

522.02

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Philip Kelly Mailing Address P.o. Box 8695 City State Zip Code Gurnee IL 60031 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Director, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.84		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84476 Amount of Each Receipt this Period 24.74 Receipt Payroll Deduction: (12.37- /Pay Period)
B. Full Name (Last, First, Middle Initial) Michael Kennedy Mailing Address 4783 Vista Ridge Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Ips Sales Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 701.63		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84573 Amount of Each Receipt this Period 60.48 Receipt Payroll Deduction: (30.24- /Pay Period)
C. Full Name (Last, First, Middle Initial) Corey Kerr Mailing Address 11335 Santa Barbara Drive City State Zip Code Plain City OH 43064 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Org Communications Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 204.59		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84651 Amount of Each Receipt this Period 9.11 Receipt Payroll Deduction: (9.11- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		94.33
TOTAL This Period (last page this line number only) ▶		

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Steven Koester Mailing Address 2122 Autumn Wood Dr City State Zip Code St Charles MO 63303 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Operations - Ellipticare Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84491 Amount of Each Receipt this Period 30.00 Receipt Payroll Deduction: (15.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Kenneth Kohler Mailing Address 694 Hampton Rd Grosse City State Zip Code Point Woods MI 48236 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Supply Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84434 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) William Koons Mailing Address 4650 Links Village D Unit A704 City State Zip Code Ponce Inlet FL 32127 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84422 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		70.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Thomas Krueger Mailing Address 37248 N Deerpath Dr City Lake Villa State IL Zip Code 60046 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Director, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 288.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84472 Amount of Each Receipt this Period 24.00 Receipt Payroll Deduction: (12.00- / Pay Period)
B. Full Name (Last, First, Middle Initial) Joseph Kubicek Mailing Address 443 Douglas City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 564.80		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84532 Amount of Each Receipt this Period 2.62 Receipt Payroll Deduction: (2.62- / Pay Period)
C. Full Name (Last, First, Middle Initial) Joseph Kubicek Mailing Address 443 Douglas City Lake Forest State IL Zip Code 60045 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 593.64		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84564 Amount of Each Receipt this Period 28.84 Receipt Payroll Deduction: (28.84- / Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		55.46
TOTAL This Period (last page this line number only) ▶		

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Cornelius Lane Mailing Address 15 Southridge City State Zip Code St Louis MO 63122 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Franchise Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84439 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Jeanne Lasheff Mailing Address 220 W Lincoln Ave City State Zip Code Libertyville IL 60048 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 359.37		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84493 Amount of Each Receipt this Period 30.66 Receipt Payroll Deduction: (15.33- /Pay Period)
C. Full Name (Last, First, Middle Initial) Margaret Lavalie Mailing Address 9410 Culross Ct City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84623 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		150.66
TOTAL This Period (last page this line number only) ▶		

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Steve Lawrence

Mailing Address 4868 Carrigan Ridge

City State Zip Code
Dublin OH 43017

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Svp, Mrktng, Retail/alt Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.43

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84462

Amount of Each Receipt this Period

200.00

Receipt

Payroll Deduction: (100.0-
0/Pay Period)

Full Name (Last, First, Middle Initial)

B. James Leidl

Mailing Address 95 Arboretum Dr

City State Zip Code
North Barrington IL 60010

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp/gm, V Mueller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

497.91

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84548

Amount of Each Receipt this Period

44.98

Receipt

Payroll Deduction: (22.49-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Douglas Lester

Mailing Address 12666 Spindletop Rd

City State Zip Code
San Diego CA 92129

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Mgr, Project

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.83

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84449

Amount of Each Receipt this Period

21.06

Receipt

Payroll Deduction: (10.53-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

266.04

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) William Lukefahr		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7
Mailing Address 14520 Memorial Drive Suite M124		Transaction ID: 71204.C84438
City State Zip Code Houston TX 77079	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Internal Application Devel	Payroll Deduction: (10.00- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B. Full Name (Last, First, Middle Initial) Michael Lynch		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7
Mailing Address 550 E Rosemary		Transaction ID: 71204.C84511
City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 384.60	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Group Pres, Med Products Mfg	Payroll Deduction: (192.3- 0/Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4307.60	

C. Full Name (Last, First, Middle Initial) Donna Mann		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7
Mailing Address 6666 Mcvey Blvd		Transaction ID: 71204.C84549
City State Zip Code West Worthington OH 43235	Amount of Each Receipt this Period 45.66	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Cardinal Health, Inc	Occupation Dir, Hr Svc Delivery/transform	Payroll Deduction: (22.83- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 532.15	

SUBTOTAL of Receipts This Page (optional)

450.26

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Timothy Martin

Mailing Address 9709 Turner Ln

City State Zip Code
 Brentwood TN 37027

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, Specialty Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84440

Amount of Each Receipt this Period

20.00

Receipt

Payroll Deduction: (10.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. Deborah McBride

Mailing Address #3 Achilles Ct

City State Zip Code
 St Peters MO 63376

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Dir, Store Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.34

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84648

Amount of Each Receipt this Period

17.94

Receipt

Payroll Deduction: (8.97/-
Pay Period)

Full Name (Last, First, Middle Initial)

C. Janice Mccampbell

Mailing Address 7000 Cardinal Place

City State Zip Code
 Dublin OH 43017-1091

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, R & D Infusion Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.27

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84581

Amount of Each Receipt this Period

71.08

Receipt

Payroll Deduction: (35.54-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

109.02

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Lindy Mclean Mailing Address 7272 Black Abbey Ct City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Key Account Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 639.98		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84578 Amount of Each Receipt this Period 66.14 Receipt Payroll Deduction: (33.07- /Pay Period)
B. Full Name (Last, First, Middle Initial) Craig Mcmillian Mailing Address 26935 Colonial Lane City State Zip Code Valencia CA 91355 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84447 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Steven Merkin Mailing Address 1481 Country Ln City State Zip Code Deerfield IL 60015 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 960.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84597 Amount of Each Receipt this Period 80.00 Receipt Payroll Deduction: (40.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		166.14
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Marc Mullen Mailing Address 1650 Sherborne Lane City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Sales & Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84633 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Robert Murphy Mailing Address 10201 Sylvian Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Ips Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84445 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Jimmy Neil Mailing Address 328 Claydon Way City State Zip Code Sacramento CA 95864 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84435 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			140.00
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Frederick Nelson Mailing Address 7303 Deacon Court City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Integrated Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 900.08			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84583 Amount of Each Receipt this Period 76.78 Receipt Payroll Deduction: (38.39- /Pay Period)
B. Full Name (Last, First, Middle Initial) James Nuckols Mailing Address 1740 Dylan Way City State Zip Code Encinitas CA 92024 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Marketing, Medication Tech Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84469 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)
C. Full Name (Last, First, Middle Initial) Mark Overman Mailing Address 900 Wyndham Hill Ct City State Zip Code Southlake TX 76092 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Health Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 409.08			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84502 Amount of Each Receipt this Period 35.04 Receipt Payroll Deduction: (17.52- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			311.82
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) William Owad Mailing Address 7558 Heatherwood Ln City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Operational Excellence Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 503.04		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84412 Amount of Each Receipt this Period 2.00 Receipt Payroll Deduction: (1.00/- Pay Period)
B. Full Name (Last, First, Middle Initial) Mark Parrish Mailing Address 9109 Eversole Run Rd City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Ceo, Healthcare Scs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84444 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- Pay Period)
C. Full Name (Last, First, Middle Initial) Angela Perkins Mailing Address 615 N Beverly Lane City State Zip Code Arlington Heights IL 60004 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84629 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		122.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Thomas Perrine Mailing Address 7249 Landon Lane City State Zip Code New Albany OH 43054 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 870.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84625 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Vicki Perryman Mailing Address 2000 Loch Lomond Dr City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Customer Service Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84541 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Kevin Peters Mailing Address 465 Fourth Fairway Dr City State Zip Code Roswell GA 30076 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Evp, Ips Sales Se Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1126.57		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84553 Amount of Each Receipt this Period 25.03 Receipt Payroll Deduction: (25.03- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		165.03
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mark Phillips Mailing Address 147 Wynnfield Blvd City Mcdonough State GA Zip Code 30252 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Controller, Regional Southeast Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84423 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Aaron Pitts Mailing Address 5014 Closeburn Ct City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Strategy & Bus Develop Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 323.04		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84480 Amount of Each Receipt this Period 26.92 Receipt Payroll Deduction: (13.46- /Pay Period)
C. Full Name (Last, First, Middle Initial) George Plava Mailing Address 3526 Pembroke Dr City Richmond State TX Zip Code 77469 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Pharmacy Practice Dev Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1589.05		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84645 Amount of Each Receipt this Period 135.54 Receipt Payroll Deduction: (67.77- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		182.46
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) John Polles Mailing Address 45 Knob Hill Circle City Canton State MA Zip Code 02021 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Reg Sp Lab Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84441 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Kathy Popejoy Mailing Address 11127 W 59th Ave City Arvada State CO Zip Code 80004 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Region Ops B Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 502.54		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84545 Amount of Each Receipt this Period 43.24 Receipt Payroll Deduction: (21.62- /Pay Period)
C. Full Name (Last, First, Middle Initial) William Rampy Mailing Address 103 Foxglove Ln City Bentonville State AR Zip Code 72712 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Franchise Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1256.24		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84636 Amount of Each Receipt this Period 107.98 Receipt Payroll Deduction: (53.99- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		171.22
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Robert Randklev Mailing Address 2711 Pebble Stone City State Zip Code Grapevine TX 76051 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Whse/dist South Region Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84543 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Stephen Reardon Mailing Address 5078 Breckenhurst Dr City State Zip Code Hilliard OH 43026 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Qra Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84533 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) David Render Mailing Address 6909 Maris Ct City State Zip Code Burleson TX 76028 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Ops Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 297.71			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84477 Amount of Each Receipt this Period 25.68 Receipt Payroll Deduction: (12.84- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			105.68
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial)
Cynthia Rhomberg

Mailing Address 9379 Redan Court

City State Zip Code
Dublin OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Vp, Corp Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84540

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (20.00-
/Pay Period)

B. Full Name (Last, First, Middle Initial)
Mark Rosenbaum

Mailing Address 6565 Lockhart Lane

City State Zip Code
Dublin OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Pres, Ips Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4192.20

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84515

Amount of Each Receipt this Period

384.60

Receipt

Payroll Deduction: (192.3-
0/Pay Period)

C. Full Name (Last, First, Middle Initial)
Annlea Rumfola

Mailing Address 8314 Davington Dr

City State Zip Code
Dublin OH 43017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health, Inc

Occupation
Vp, Enterprise It

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84416

Amount of Each Receipt this Period

20.00

Receipt

Payroll Deduction: (10.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

444.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 74

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Claudia Russell Mailing Address 5064 Seagrove Cove City San Diego State CA Zip Code 92130 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Strategy & Innovation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1006.73		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84599 Amount of Each Receipt this Period 87.98 Receipt Payroll Deduction: (43.99- /Pay Period)
B. Full Name (Last, First, Middle Initial) David Schlotterbeck Mailing Address 12 Hermitage Lane City Laguna Niguel State CA Zip Code 92677 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Ceo, Clinical & Medical Pr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 3784.50		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84512 Amount of Each Receipt this Period 384.60 Receipt Payroll Deduction: (192.3-0 /Pay Period)
C. Full Name (Last, First, Middle Initial) Hal Schwartz Mailing Address 200 Harbor Dr #901 City San Diego State CA Zip Code 92101 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Product Assurance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 240.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84421 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional)		492.58
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) James Scott Mailing Address 5893 Hunter Pl. Apartment D City State Zip Code Westerville OH 43082 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Alternate Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1410.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84457 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0- 0/Pay Period)
B. Full Name (Last, First, Middle Initial) Michael Scrase Mailing Address 8358 Davington City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Director, Enterprise It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 662.62		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84563 Amount of Each Receipt this Period 56.96 Receipt Payroll Deduction: (28.48- /Pay Period)
C. Full Name (Last, First, Middle Initial) Frank Segrave Mailing Address 5371 Gordon Way City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation President, Generics Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2892.20		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84517 Amount of Each Receipt this Period 384.60 Receipt Payroll Deduction: (192.3- 0/Pay Period)

SUBTOTAL of Receipts This Page (optional)

641.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Steven Seide Mailing Address 30 Nutmeg Ln City North Andover State MA Zip Code 01845 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Reg Ambulatory Care Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.85			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84501 Amount of Each Receipt this Period 33.60 Receipt Payroll Deduction: (16.80- /Pay Period)
B. Full Name (Last, First, Middle Initial) Kendell Sherrer Mailing Address 7720 Heatherwood Ln City Dublin State OH Zip Code 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 482.64			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84544 Amount of Each Receipt this Period 40.22 Receipt Payroll Deduction: (20.11- /Pay Period)
C. Full Name (Last, First, Middle Initial) David Shreiner Mailing Address 225 Raintree Drive City Encinitas State CA Zip Code 92024 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Medication Solutions Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84429 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

93.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Jesse Sims

Mailing Address 11014 Black Falls Ct

City State Zip Code
 Sugar Land TX 77478

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Mgr, Service - Technical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84631

Amount of Each Receipt this Period

100.00

Receipt

Payroll Deduction: (50.00-
/Pay Period)

Full Name (Last, First, Middle Initial)

B. William Smith

Mailing Address 205 Wells Fargo Dr

City State Zip Code
 Knoxville TN 37922

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Mgr, Group It

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.92

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84450

Amount of Each Receipt this Period

21.16

Receipt

Payroll Deduction: (10.58-
/Pay Period)

Full Name (Last, First, Middle Initial)

C. Joan Stafslie

Mailing Address 3140 Dusty Trail

City State Zip Code
 Olivenhain CA 92024

FEC ID number of contributing federal political committee.

C

Name of Employer
Cardinal Health, IncOccupation
Vp, General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 9 / 2 0 0 7

Transaction ID: 71204.C84556

Amount of Each Receipt this Period

50.00

Receipt

Payroll Deduction: (25.00-
/Pay Period)

SUBTOTAL of Receipts This Page (optional)

171.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mark Stauffer Mailing Address 10644 Dundee Ct City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Finance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1335.70			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84639 Amount of Each Receipt this Period 119.98 Receipt Payroll Deduction: (59.99- /Pay Period)
B. Full Name (Last, First, Middle Initial) Suzanne Stoddard Mailing Address P.o. Box 812 City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Investor Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 311.86			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84478 Amount of Each Receipt this Period 26.40 Receipt Payroll Deduction: (13.20- /Pay Period)
C. Full Name (Last, First, Middle Initial) Greg Storm Mailing Address 7703 E 85th St City State Zip Code Tulsa OK 74133 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Proc Supply Chain Solutns Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 288.66			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84485 Amount of Each Receipt this Period 29.62 Receipt Payroll Deduction: (14.81- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			176.00
TOTAL This Period (last page this line number only) ▶			

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 74

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Dennis Streppa Mailing Address 251 E Witchwood Ln City Lake Bluff State IL Zip Code 60044 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp/gm, Gloves Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 380.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 71204.C84534 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">40.00</td> </tr> </table> Receipt Payroll Deduction: (20.00- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	9		2	0	0	7	40.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	1		0	9		2	0	0	7																							
40.00																																
B. Full Name (Last, First, Middle Initial) David Strizzi Mailing Address 8468 Deep Run City Powell State OH Zip Code 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp,warehouse Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 71204.C84420 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">20.00</td> </tr> </table> Receipt Payroll Deduction: (10.00- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	9		2	0	0	7	20.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	1		0	9		2	0	0	7																							
20.00																																
C. Full Name (Last, First, Middle Initial) Robert Summers Mailing Address 146 Chasely Circle City Powell State OH Zip Code 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Mrkt -safety Net Sol Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 637.43		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 71204.C84567 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">58.66</td> </tr> </table> Receipt Payroll Deduction: (29.33- /Pay Period)	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	9		2	0	0	7	58.66									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	1		0	9		2	0	0	7																							
58.66																																
SUBTOTAL of Receipts This Page (optional)		<table border="1"> <tr> <td>118.66</td> </tr> </table>	118.66																													
118.66																																
TOTAL This Period (last page this line number only)		<table border="1"> <tr> <td></td> </tr> </table>																														

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Michael Synor Mailing Address 1272 Fairway Drive N City State Zip Code Foristell MO 63348 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Sales - Retail Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84417 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Mary Jane Tew Mailing Address 6315 Duffy Rd City State Zip Code Delaware OH 43015 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Field Sales Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84559 Amount of Each Receipt this Period 50.00 Receipt Payroll Deduction: (25.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Brian Thomas Mailing Address 5925 Boulder Bluff City State Zip Code Cumming GA 30040 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Dir, Reg Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 212.74			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84650 Amount of Each Receipt this Period 18.14 Receipt Payroll Deduction: (9.07/- Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			88.14
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Lloyd Thurman		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 2527 Plantation Springs		Transaction ID: 71204.C84436	
City Richmond	State TX	Zip Code 77469	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Vp, Sales	Payroll Deduction: (10.00- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		
B. Full Name (Last, First, Middle Initial) Amy Treat		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 11107 Sheldon Bend Lane		Transaction ID: 71204.C84443	
City Richmond	State TX	Zip Code 77469	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Director, Business Partner	Payroll Deduction: (10.00- /Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		
C. Full Name (Last, First, Middle Initial) Gordon Troup		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 4627 Stockport Cir		Transaction ID: 71204.C84468	
City Dublin	State OH	Zip Code 43016	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Cardinal Health, Inc	Occupation Pres/gm, Nuclear Pharmacy Svcs	Payroll Deduction: (100.0- 0/Pay Period)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1410.00		

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Ethan Trull			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 2663 Marl Oak Dr			Transaction ID: 71204.C84498	
City State Zip Code Highland Park IL 60035			Amount of Each Receipt this Period 32.48	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Vp And Assoc General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 389.76		
B. Full Name (Last, First, Middle Initial) Kristina Tuttle			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 8187 Shannon Glen Blvd			Transaction ID: 71204.C84474	
City State Zip Code Dublin OH 43016			Amount of Each Receipt this Period 24.38	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Director, Enterprise It		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 283.25		
C. Full Name (Last, First, Middle Initial) Craig Vittitoe			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7	
Mailing Address 525 Havana Avenue			Transaction ID: 71204.C84446	
City State Zip Code Long Beach CA 90814			Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			Receipt	
Name of Employer Cardinal Health, Inc		Occupation Mgr, Region		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)

76.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Richard Walsh Mailing Address 8722 Sweetwater Ct City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Vp, Flight Ops/bus Cont Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 975.53			Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84598 Amount of Each Receipt this Period 85.90 Receipt Payroll Deduction: (42.95- /Pay Period)
B. Full Name (Last, First, Middle Initial) Robert Walter Mailing Address 2423 North Ocean Blvd City State Zip Code Gulf Stream FL 33482 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4608.48			Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84507 Amount of Each Receipt this Period 384.04 Receipt Payroll Deduction: (192.0- 2/Pay Period)
C. Full Name (Last, First, Middle Initial) Carole Watkins Mailing Address 1967 Woodlands Place City State Zip Code Powell OH 43065 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Chief Human Resources Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3092.20			Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84514 Amount of Each Receipt this Period 384.60 Receipt Payroll Deduction: (192.3- 0/Pay Period)

SUBTOTAL of Receipts This Page (optional)

854.54

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Mark Whitaker Mailing Address 3728 Deerfield St City High Point State NC Zip Code 27265 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Mgr, Facility Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84425 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Rodney Whitmore Mailing Address 7159 Drucilla St Nw City Pickerington State OH Zip Code 43147 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Hr Business Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00			Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84464 Amount of Each Receipt this Period 200.00 Receipt Payroll Deduction: (100.0-0 /Pay Period)
C. Full Name (Last, First, Middle Initial) Dwight Winstead Mailing Address 2540 Presidio Dr City San Diego State CA Zip Code 92103 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Group President, Cts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2692.20			Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84516 Amount of Each Receipt this Period 384.60 Receipt Payroll Deduction: (192.3-0 /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶			604.60
TOTAL This Period (last page this line number only) ▶			

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Deborah Wolin Mailing Address 44 Lake Mist Drive City State Zip Code Sugar Land TX 77479 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Counsel, Sr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84537 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
B. Full Name (Last, First, Middle Initial) Philip Wollar Mailing Address 412 Albany Lane City State Zip Code Vernon Hills IL 60061 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation CnsIt, App Architecture Sr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84433 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00- /Pay Period)
C. Full Name (Last, First, Middle Initial) Anthony Woo Mailing Address 6151 Haddo Way City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Corporate Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 386.94		Date of Receipt MM / DD / YYYY 11 / 09 / 2007 Transaction ID: 71204.C84542 Amount of Each Receipt this Period 40.00 Receipt Payroll Deduction: (20.00- /Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		100.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Connie Woodburn Mailing Address 9761 Erin Woods Dr City State Zip Code Dublin OH 43017 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Prof & Gov't Rel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3096.97		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84481 Amount of Each Receipt this Period 265.38 Receipt Payroll Deduction: (132.6-9/Pay Period)
B. Full Name (Last, First, Middle Initial) James Worley Mailing Address 5101 Nyah Court City State Zip Code Galena OH 43021 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Independent Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84622 Amount of Each Receipt this Period 100.00 Receipt Payroll Deduction: (50.00-/Pay Period)
C. Full Name (Last, First, Middle Initial) James Wulf Mailing Address 3983 Newhall Rd City State Zip Code Columbus OH 43220 FEC ID number of contributing federal political committee. C Name of Employer Cardinal Health, Inc Occupation Svp, Corp Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7 Transaction ID: 71204.C84428 Amount of Each Receipt this Period 20.00 Receipt Payroll Deduction: (10.00-/Pay Period)
SUBTOTAL of Receipts This Page (optional) ▶		385.38
TOTAL This Period (last page this line number only) ▶		15224.88

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A.

Full Name (Last, First, Middle Initial)

Comerica Bank

Mailing Address Po Box 75000 (mc 2250)

City

Detroit

State

MI

Zip Code

48275-2250

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Bank

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

7462.46

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: 71204.C84411

Amount of Each Receipt this Period

795.65

Interest Received

SUBTOTAL of Receipts This Page (optional)

795.65

TOTAL This Period (last page this line number only)

795.65

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Congressman Bart Gordon Committee

Mailing Address P.O. Box 2008

City Murfreesboro State TN Zip Code 37133-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
BARTON JENNINGS GORDON

Office Sought: ☒ House
☐ Senate
☐ President

State: TN District: 06

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 71204.E1024

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Ron Lewis for Congress

Mailing Address P.O. Box 307

City Elizabethtown State KY Zip Code 42702-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
RON LEWIS

Office Sought: ☒ House
☐ Senate
☐ President

State: KY District: 02

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 71204.E1005

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Tim Murphy for Congress

Mailing Address P.O. Box 24551

City Pittsburgh State PA Zip Code 15234-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
TIM MURPHY

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 18

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 71204.E1008

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Rogers for Congress

Mailing Address P.O. Box 581

City
Brighton

State
MI

Zip Code
48116-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
MICHAEL J ROGERS

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 08

Transaction ID: 71204.E1023

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Allyson Schwartz for Congress

Mailing Address 38 Ivy Street, SE

City
Washington

State
DC

Zip Code
20003-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
ALLYSON SCHWARTZ

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 13

Transaction ID: 71204.E1011

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Volunteers for Shimkus

Mailing Address 700 12th Street, NW
Suite 700

City
Washington

State
DC

Zip Code
20005-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
JOHN M SHIMKUS

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 19

Transaction ID: 71204.E1004

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

7000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Ohio House Republican Campaign Cmte

Mailing Address 100 East Broad Street
Suite 2225

City Columbus State OH Zip Code 43215-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2007
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

ANNUAL/OTHER

Transaction ID: 71204.E1012

Date of Disbursement

11 / 15 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Citizens with Celeste

Mailing Address 1632 West First Avenue

City Columbus State OH Zip Code 43212-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71204.E1014

Date of Disbursement

11 / 15 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Eachus

Mailing Address P.O. Box 2174

City Hazleton State PA Zip Code 18201-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71204.E1007

Date of Disbursement

11 / 06 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Friends of Evans

Mailing Address 2124 Homer Street

City Philadelphia State PA Zip Code 19138-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71204.E1006

Date of Disbursement

11 / 06 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Heard

Mailing Address 2603 Burnaby Drive

City Columbus State OH Zip Code 43209-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71204.E1015

Date of Disbursement

11 / 15 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Keep Kearney in Senate

Mailing Address 3 Lenox Lane

City Cincinnati State OH Zip Code 45229-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71204.E1018

Date of Disbursement

11 / 15 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Friends of Dale Miller

Mailing Address 4300 West 143 Rd. St.

City Cleveland State OH Zip Code 44135-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71204.E1019

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Redfern 2006

Mailing Address 2841 Bluff Ridge Drive

City Port Clinton State OH Zip Code 43452-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71204.E1022

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Tom Roberts

Mailing Address 131 S. Wilkinson Street

City Dayton State OH Zip Code 45402-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71204.E1021

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

Full Name (Last, First, Middle Initial)

A. Seitz for State Representative

Mailing Address 4401 Abby Court

City Cincinnati State OH Zip Code 45248-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71204.E1016

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Mike J. Skindell

Mailing Address 16800 Delaware Avenue

City Lakewood State OH Zip Code 44107-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71204.E1013

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Shirley A. Smith

Mailing Address 13901 Woodworth Avenue

City Cleveland State OH Zip Code 44112-

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 71204.E1020

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CARDINAL HEALTH INC. PAC A/K/A CARDINAL HEALTH COMPANIES PAC

A. Full Name (Last, First, Middle Initial) Strickland for Governor		Transaction ID: 71204.E1009 Date of Disbursement <div> <div>11</div> <div>07</div> <div>2007</div> </div>
Mailing Address 42 Park Drive		Amount of Each Disbursement this Period <div>2500.00</div>
City Columbus State OH Zip Code 43209-		
Purpose of Disbursement DIRECT CONTRIBUTION	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Citizens for Larry Wolpert		Transaction ID: 71204.E1017 Date of Disbursement <div> <div>11</div> <div>15</div> <div>2007</div> </div>
Mailing Address 100 South Third Street		Amount of Each Disbursement this Period <div>500.00</div>
City Columbus State OH Zip Code 43215-		
Purpose of Disbursement DIRECT CONTRIBUTION	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Friends of Rob Wonderling for Senate		Transaction ID: 71204.E1010 Date of Disbursement <div> <div>11</div> <div>09</div> <div>2007</div> </div>
Mailing Address 955 Haldeman Road		Amount of Each Disbursement this Period <div>500.00</div>
City Hatfield State PA Zip Code 19440-		
Purpose of Disbursement DIRECT CONTRIBUTION	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>3500.00</div>
TOTAL This Period (last page this line number only)		<div>12000.00</div>